Fiscal Estimate - 2013 Session

☑ Original ☐ Updated	Corrected Supplemental									
LRB Number 13-2407/3	Introduction Number SB-311									
Description Dental hygienist's administration of nitrous oxide inhalation analgesia and practice of dental hygiene										
Fiscal Effect										
State: No State Fiscal Effect Indeterminate Appropriations Approp										
Fund Sources Affected GPR FED PRS SEG SEGS 20.165(1)(g)										
Agency/Prepared By	Authorized Signature Date									
DSPS/ Michelle Bea Beasley (608) 267-1811	Greg Gasper (608) 266-8608 10/3/2013									

Fiscal Estimate Narratives DSPS 10/3/2013

LRB Number 13-2407/3	Introduction Number	SB-311	Estimate Type	Original					
Description									
Dental hygienist's administration of nitrous oxide inhalation analgesia and practice of dental hygiene									

Assumptions Used in Arriving at Fiscal Estimate

According to the Division Administrators and the Budget Director, there will be costs associated with staff time needed to develop the rule for the Dentistry Examining Board, depending on the complexity. This will include coordinating the rule-making process with the Board; conducting research; drafting rule(s); and processing the rules through public hearings, legislative review, and adoption. There may be some costs associated with updating credentialing and licensing forms. The Agency anticipate that no other resources will be necessary to develop this rule.

Long-Range Fiscal Implications

Fiscal Estimate Worksheet - 2013 Session

Detailed Estimate of Annual Fiscal Effect

	X	Original		Upd	ated		Corrected		Supplemental		
LF	₹B	Number	13-240	7/3		Intro	duction No	umber	SB-311		
	Description Dental hygienist's administration of nitrous oxide inhalation analgesia and practice of dental hygiene										
	I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect):										
Th	There will be one-time costs associated with developing this rule.										
11.	Ann	ualized Cos	its:				Annualized Fiscal Impact on funds from				
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⊢		to Individua		ations							
H		OTAL State			/		\$6,1	100	\$		
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	FED										
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Ш	SEG	S/SEG-S									
III. re	Sta venu	te Revenue: ıes (e.g., ta)	s - Complet k increase,	e this c	only whe	en proposa ense fee, e	l will increas ts.)	e or decre	ase state		
							Increased Rev Decreased				
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NET CHANGE IN COSTS NET CHANGE IN REVENUE				\$6,1	\$						
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Αç	jenc	y/Prepared	Ву		P	uthorized	Signature		Date		
							reg Gasper (608) 266-8608				